

Department of Medical Assistance Services 600 East Broad Street, Suite 1300 Richmond, Virginia 23219

http://www.dmas.state.va.us

MEDICAID MEMO

TO: All Obstetric/Gynecological and Prenatal Care Providers, Pharmacists and

Managed Care Organizations Participating in the Virginia Medical

Assistance Programs

FROM: Gregg A. Pane, MD, MPA, Director MEMO: Special

Department of Medical Assistance Services (DMAS)

DATE: 3/21/2011

SUBJECT: Medicaid Coverage of Makena[™] (17 Alpha Hydroxyprogesterone Caproate) –

Effective March 14, 2011

The purpose of this memorandum is to inform providers that the Department of Medical Assistance Services (DMAS) will begin covering MakenaTM, an alpha hydroxyprogesterone caproate injectable drug. MakenaTM received FDA approval on February 4, 2011 for the reduction of pre-term labor for women with a previous history of singleton spontaneous births. MakenaTM, manufactured and sold by KV Pharmaceutical, will be covered for fee-for-service members in Medicaid, Medallion, FAMIS, FAMIS Moms and FAMIS Plus.

The previous interim payment process for compounding the drug through a specialty pharmacy, which was described in a January 1, 2010 memorandum (located at http://www.dmas.virginia.gov/downloads/pdfs/mm-alpha_apc.pdf), will be discontinued effective March 14, 2011. Once Makena is marketed, pharmacies will no longer be permitted to compound 17P since the Food and Drug Administration (FDA) and the Virginia Board of Pharmacy prohibits the compounding of drugs that are copies of commercially available drugs. DMAS was informed on Monday, March 14, 2011 by K-V Pharmaceuticals, that Makena is available for shipment from specialty distributors. DMAS apologizes for the delayed notification, but Makena was released earlier than expected. The Department of Medical Assistance Services (DMAS) covers physician/practitioner administered drugs through the medical benefit for fee-for-service enrollees. Medications which are administered in an office or outpatient setting (such as Makena by a physician/practitioner must be billed by the physician/practitioner since they are the provider of service. DMAS will not reimburse the distributors since they are not administering the drug.

Since MakenaTM must be administered by a health care professional according to its FDA approved labeling, Medicaid enrolled providers will need to obtain the medication from the manufacturer or other distributor. The provider should use the Healthcare Common Procedure Coding System (HCPCS) codes when submitting the claim on all electronic (837P) and paper claims (CMS-1500) submissions. DMAS should be billed after each 250 mg / 1 mL dose is administered using HCPCS procedure code J3490 beginning March 14, 2011. Providers will need to provide DMAS with their actual invoice demonstrating their cost for MakenaTM. DMAS reimbursement will be the actual invoice cost per each milliliter. Failure to supply the invoice at the time of billing will result in the claim being denied and delay in payment. Providers may purchase MakenaTM from either CuraScript, Inc. at 877-599-7748 or TheraCom at 888-214-8313.

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Information concerning Makena[™], including its approved uses, side effects and other clinical information can be found at the following link to the U.S. Food and Drug Administration (FDA) website: http://www.fda.gov/NewsEvents/Newsroom/PressAnnouncements/ucm242234.htm.

For Members in DMAS Contracted Managed Care Organizations (MCOs)

Many Medicaid members are enrolled with one of the Department's contracted Managed Care Organizations (MCO). In order to be reimbursed for services provided to an MCO enrolled individual, providers must follow their respective contract with the MCO. The MCO may utilize different prior authorization, billing, and reimbursement guidelines than those described for Medicaid fee-for-service individuals. For more information, please contact the MCO directly. MCO contact information, including pharmacy service contacts, is available on the DMAS website at http://dmasya.dmas.virginia.gov/Content_atchs/mc/mc-guide_p2.pdf.

VIRGINIA MEDICAID WEB PORTAL

DMAS offers a web-based Internet option to access information regarding Medicaid or FAMIS member eligibility, claims status, check status, service limits, service authorizations, and electronic copies of remittance advices. Providers must register through the Virginia Medicaid Web Portal in order to access this information. The Virginia Medicaid Web Portal can be accessed by going to: www.virginiamedicaid.dmas.virginia.gov. If you have any questions regarding the Virginia Medicaid Web Portal, please contact the ACS Web Portal Support Helpdesk, toll free, at 1-866-352-0496 from 8:00 A.M. to 5:00 P.M. Monday through Friday, except holidays. The MediCall audio response system provides similar information and can be accessed by calling 1-800-884-9730 or 1-800-772-9996. Both options are available at no cost to the provider. Providers may also access service authorization information including status via iEXCHANGETM at http://dmas.kepro.org/.

ELIGIBILITY VENDORS

DMAS has contracts with the following eligibility verification vendors offering internet real-time, batch and/or integrated platforms. Eligibility details such as eligibility status, third party liability, and service limits for many service types and procedures are available. Contact information for each of the vendors is listed below.

Passport Health	SIEMENS Medical Solutions –	Emdeon
Communications, Inc.	Health Services	www.emdeon.com
www.passporthealth.com	Foundation Enterprise Systems/HDX	Telephone:
sales@passporthealth.com	www.hdx.com	1 (877) 363-3666
Telephone:	Telephone:	
1 (888) 661-5657	1 (610) 219-2322	

"HELPLINE"

The "HELPLINE" is available to answer questions Monday through Friday from 8:30 a.m. to 4:30 p.m., except on state holidays. The "HELPLINE" numbers are:

1-804-786-6273 Richmond area and out-of-state long distance 1-800-552-8627 All other areas (in-state, toll-free long distance)

Please remember that the "HELPLINE" is for provider use only. Please have your Medicaid Provider Identification Number available when you call.